



## UNITED STATES PATENT AND TRADEMARK OFFICE

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UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 8962

SERIAL NUMBER 09/862,480	FILING DATE 05/22/2001  RULE	CLASS 188	GROUP ART UNIT 3683	ATTORNEY DOCKET NO. 60130- 1126/99MRA0117
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## APPLICANTS

Roberto Conti, Olgiate Olona, ITALY;

Giovanni Bellomi, Novara, ITALY;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

ITALY MI2000A 001150 05/24/2000

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 07/20/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials _____	ITALY	2	7	1

## ADDRESS

26096  
CARLSON, GASKEY & OLDS, P.C.  
400 WEST MAPLE ROAD  
SUITE 350  
BIRMINGHAM, MI  
48009

## TITLE

Disk brake actuator

FILING FEE  RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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<b>SERIAL NUMBER</b> 09/862,480	<b>FILING DATE</b> 05/22/2001 <b>RULE</b>	<b>CLASS</b> 188	<b>GROUP ART UNIT</b> 3613	<b>ATTORNEY DOCKET NO.</b> 60130- 1126/99MRA0117
<b>APPLICANTS</b> Roberto Conti, Olgiate Olona, ITALY; Giovanni Bellomi, Novara, ITALY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** ITALY MI2000A 001150 05/24/2000				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 07/20/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 7
Verified and Acknowledged	Examiner's Signature	Initials	<b>INDEPENDENT CLAIMS</b> 1	
<b>ADDRESS</b> Karin H. Butchko CARLSON, GASKEY & OLDS, P.C. 400 West Maple Road, Suite 350 Birmingham, MI 48009				
<b>TITLE</b> Disk brake actuator				
<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	